



Contingency Program

TRICARE Regional Office (TRO) – South

July 23, 2008

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Joseph Sanchez, 1st LT, USAF, MSC

Mr. Terry Handley, HMHS, Contingency Coordinator



Purpose



- Introduce the TRO-South High Performance Teams, Strategic Initiative to Improve Preparedness
 - Metric is number of Exercises Between MTF/MCSC
 - Review Requirement for Exercises
- Demonstrate Collaboration Benefits of Regional Office/MCSC in Response to Contingency Event
- Introduce Contingency Event/Exercise Tracking Form
- Review Collaboration Support When Providers are Deployed



Introduction





Contingency Officer Coast Guard Liaison TRICARE Regional Office



FEMA Incident Command System Courses

- ICS 100
- ICS 200
- ICS 700
- ICS 800
- ICS 300

In addition:

JOMMC, MHAC, USACHPPM RISK Comm., Navy DCO, Risk Mgmt Courses, HAZMAT, & Shipyard Competent Person

CG under the DHS vice DoD:

Posse Comitatus does not apply allowing the CG to execute State and Local laws as well as Federal, making the CG the lead Federal Law Enforcement Agency i.e. CG Chief of Staff designated as Lead Officer in Pandemic Flu Response.



Threats and Vulnerabilities



Getty Images / Joe Raedle



JCAHO



Standing Together

An Emergency Planning Guide for America's Communities



Joint Commission
an Accreditation of Healthcare Organizations
Setting the Standard for Quality in Health Care

SIDEBAR 7. EXAMPLES OF COMMUNITY-BASED EMERGENCIES

- Extremes of weather/climate/geography
 - earthquake
 - hurricane
 - flood
 - tornado
 - blizzard
 - drought
 - volcanic eruption
 - mudslide or avalanche
- Dam failure
- Regional power outage
- Civil disturbance
- Terrorism and weapons of mass destruction
 - bombs (conventional or nuclear)
 - biological/chemical agents
 - cyberterrorism
- Public health emergencies (such as an outbreak of SARS or pandemic influenza)
- Wildland or community-based fires
- Commercial transportation accidents
 - train derailments
 - air crashes
 - multiple highway casualties
- Hazardous materials release
 - radiation
 - toxic chemicals
- Sudden influx of residents with health care and other basic needs (food, water, shelter, clothing) from neighboring communities

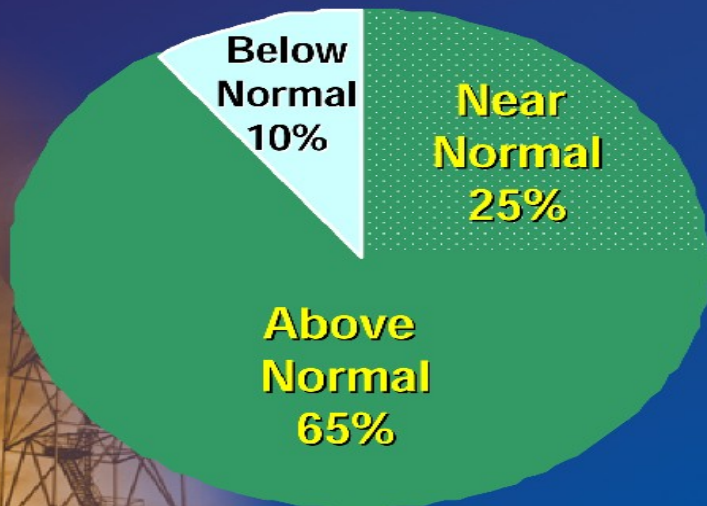


2008 Hurricane Season



2008 Atlantic Hurricane Outlook

**90% Chance of Near Normal
or Above Normal Season**



**60% – 70% probability
for each range**

Named Storms	12 - 16
Hurricanes	6 - 9
Major Hurricanes	2 - 5



19 June 2008 NOAA Report



Observed changes in North American extreme events, assessment of human influence for the observed changes, and likelihood that the changes will continue through the 21st century¹.

Phenomenon and direction of change	Where and when these changes occurred in past 50 years	Linkage of human activity to observed changes	Likelihood of continued future changes in this century
Warmer and fewer cold days and nights	Over most land areas, the last 10 years had lower numbers of severe cold snaps than any other 10-year period	Likely warmer extreme cold days and nights, and fewer frosts ²	Very likely ⁴
Hotter and more frequent hot days and nights	Over most of North America	Likely for warmer nights ²	Very likely ⁴
More frequent heat waves and warm spells	Over most land areas, most pronounced over northwestern two thirds of North America	Likely for certain aspects, e.g., night-time temperatures; & linkage to record high annual temperatures ³	Very likely ⁴
More frequent and intense heavy downpours and higher proportion of total rainfall in heavy precipitation events	Over many areas	Linked indirectly through increased water vapor, a critical factor for heavy precipitation events ³	Very likely ⁴
Increases in area affected by drought	No overall average change for North America, but regional changes are evident	Likely, Southwest U.S.A. ³ Evidence that 1930's & 1950's droughts were linked to natural patterns of sea surface temperature variability	Likely in Southwest U.S.A., parts of Mexico and Caribbean ⁴
More intense hurricanes	Substantial increase in Atlantic since 1970; Likely increase in Atlantic since 1950s; increasing tendency in W. Pacific and decreasing tendency in E. Pacific (Mexico West Coast) since 1980 ³	Linked indirectly through increasing sea surface temperature, a critical factor for intense hurricanes ³ ; a confident assessment requires further study ³	Likely ⁴

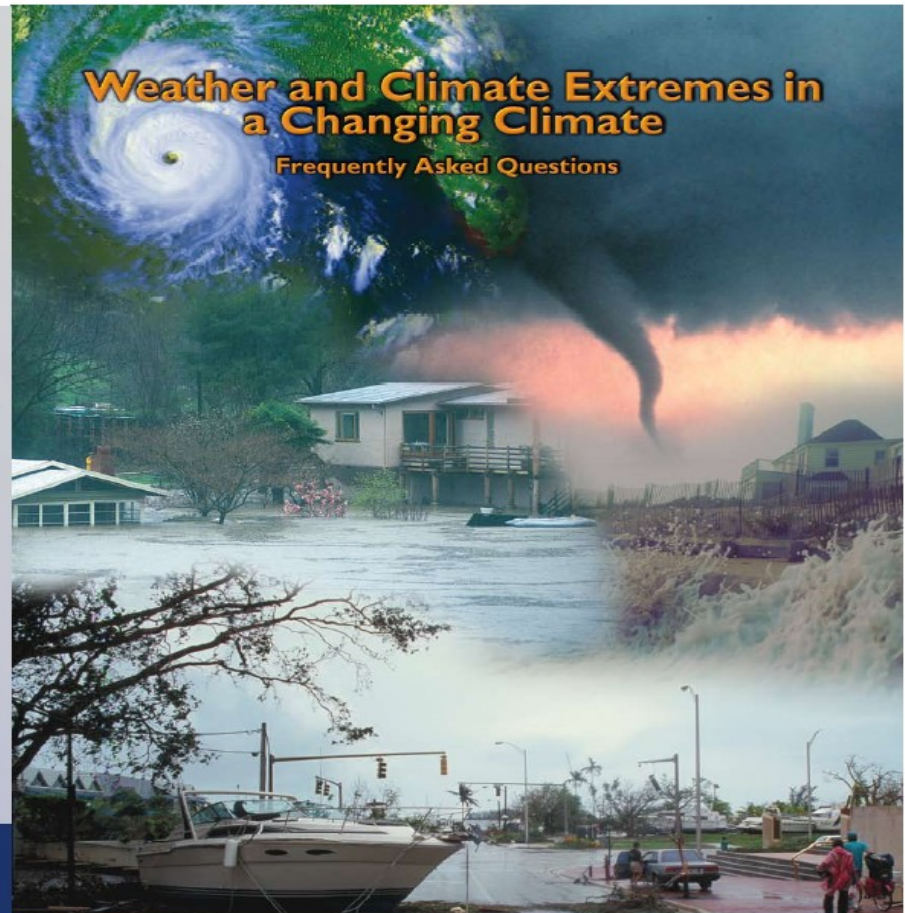
¹Based on frequently used family of IPCC emission scenarios

²Based on formal attribution studies and expert judgment

³Based on expert judgment

⁴Based on model projections and expert judgment

⁵As measured by the Power Dissipation Index (which combines storm intensity, duration and frequency)



Findings and Summary of the U.S. Climate Change Science Program
Synthesis and Assessment Report 3.3



High Performance Teams



- Five teams within TRO-S
- Each cross-functional team has members from all TRO-South divisions
- HMHS provides team participants
- Teams tasked with TMA strategic goals
- Monitor progress and report regularly to Regional Director
- Collaboration w/TRO West and North Regional Offices, as well as TMA

TRO South Dashboard

June-08

HP TEAM	TRO South Strategic Initiative	Current Status	HP TEAM	TRO South Strategic Initiative	Current Status
1	<u>Enhance Optimization</u>		3	<u>Improve Visibility of Clinical Quality Oversight</u>	
1	<u>Increase ROER Recapture</u>		3	<u>Enhance Utilization of Preventive Services (HEDIS)</u>	
1	<u>Increase use of TMOP</u>		3	<u>Implement Disease Management Improvements</u>	
1	<u>Implement Regional Pharmacy Pricing Audits</u>		4	<u>Implement TRO G-SM Development Plan</u>	
1	<u>Improve VA/TRO Collaboration (2)</u>		5	<u>Increase MTE/MCSC Contingency Exercises</u>	
1	<u>Restrain Private Sector Care Costs</u>		5	<u>Increase Guard/Reserve Beneficiary Satisfaction</u>	
2	<u>Improve Overseas Claims Processing</u>		5	<u>Enhance Network Adequacy</u>	
2	<u>CONUS Duplicate Claims Reduction</u>		5	<u>Meet Army's Enhanced ATC Standards</u>	
3	<u>Enhance Services for Wounded Warriors</u>		5	<u>Improve Customer Satisfaction w/ Purchased Care</u>	
3	<u>Implement RH Process Improvements (6)</u>				

	GREEN - on track w/ milestones and/or targets to achieve END STATE.		Current Reporting Period			Prior Reporting Period
	AMBER - on track w/majority of milestones and/or targets to achieve END STATE (minor issues/no show-stoppers to achieve GREEN status in near term)					
	RED - not on track w/milestones to achieve END STATE (major/show stopper issues that may require assistance from Regional Director).					

Initiative: Improve Preparedness: Increase Number of MTF/MCSC Contingency Exercises

HP Team:

Objective/End State

Exercises to be completed:

1. Primary Goal: (contractual rqmt)
 - a. 3Q/4QFY08 - 24 (9 to date)
 - b. 1Q/2QFY09 - 48
2. Stretch Goal: (?)
 - a. 3Q/4QFY08 - 43
 - b. 1Q/2QFY09 - 86

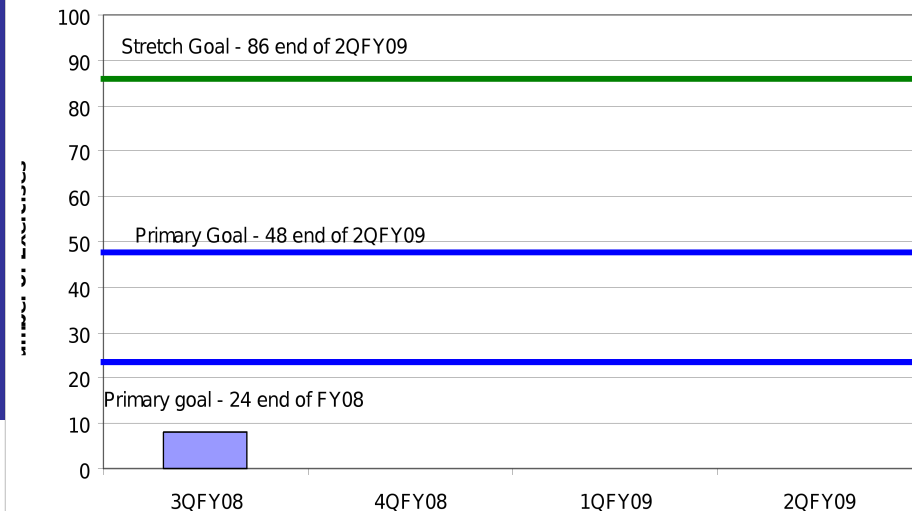
Actions

1. Encouraged Svcs, Int Cmds, and MTF CLs to invite HMHS to participate in exercises in OY5 - 15 Apr 08
2. Advertized need for exercises during 10 MTF CDR orientations - on going
3. LCDR Coughlin has developed an MTF work sheet to record contingency exercises - 14 May 08
4. CG has committed to holding an exercise with all its MTFs in the South Region.
5. LCDR Coughlin is drafting a letter for MG Grand need for exercises.

Milestones/Targets

- M1 - Determine baseline - 17 exercises held in OY4 (96 required) - Mar 08**
- M2 - TROS partners with HMHS to advertise to Services, Int CDRs, and MTFs value of holding these exercises - on going**
- M3 - Monitor number of exercises held - 9 exercises held in 3QFY08 - on going**

MTF/MCSC Contingency Exercises





Guiding Policy





Conformed Contract



- **Section F - Deliveries of Performance**

(20) Contingency Program

Quantity 1: 1

Time of Delivery for 85% of the MTFs within 3 months following the start of option period 1 100% within 6 months following the start of option period I. Update by the 60th calendar day of subsequent option periods.

- **Section H - para ss, 3rd para**

Contingency Program: The contractor will develop and implement a contingency program, in conjunction with each MTF, and provide the documented program to the Regional Director for 85% of the MTFs in the South Region within 3 months following the start of option period 1. The contractor will provide documented contingency programs for 100% of MTFs within six months following the start of option period 1.



Conformed Contract Cont.



- **Para C-7.31.**

The contractor shall participate in each MTF's Installation Level Contingency Exercise twice each year. The purpose of the exercise is to test the contingency program under a variety of situations and to provide information from which the contractor's contingency program shall be updated. The contractor shall also participate in Regionally Coordinated Table Top Contingency Exercises each year.

- **Para C-7.32.**

The contractor shall implement the contingency program at any or all locations with forty-eight (48) hours of being notified by the Regional Director that a crisis exists.



Contingency Plan OPY5 Para 1



- HMHS shall implement this contingency plan within forty-eight (48) hours of being notified by the TRICARE Regional Office (TRO) Director.
- HMHS will participate in up to two Regionally-Coordinated Table Top Contingency Exercises and up to two MTF (installation) level contingency exercises each year for the purpose of testing this plan.
- The success of this plan shall be measured by the ability of HMHS to ensure that health care services are continuously available to TRICARE eligible beneficiaries as the MTF responds to war, deployments, training, contingencies, special operations, or any other situations that may impact the MTF's ability to provide care and services (C-7.30.1, C-7.31, C-7.32).



Contingency Plan OPY5, Para 1 Cont.



- Real world deployments and/or contingencies where HMHS participates can suffice for exercises, if recommended for approval by the MTF commander/commanding officer to the TRO Regional Director.
- Real world deployments and/or contingencies where HMHS participates can also suffice for regional exercises where TRO-South is approval authority.



TMA Emergency Support Working Group





TMA Emergency Support Working Group (ESWG)



- Chaired LCDR Eric Timmens:
(703) 614-4158, eric.timmens@tma.osd.mil
- Plan and coordinate:
 - Policy actions
 - Purchased care activities
 - Education/outreach efforts directly supporting TRICARE beneficiaries impacted by various types of disasters, to include hurricanes, tornadoes, flooding, etc.
- Serve as a liaison to the Deputy Director, TMA, ASD (HA), and other members of the HA/TMA leadership, providing:
 - Timely information regarding actions taken,
 - Impact of actions, status reports, etc.



ESWG Participants

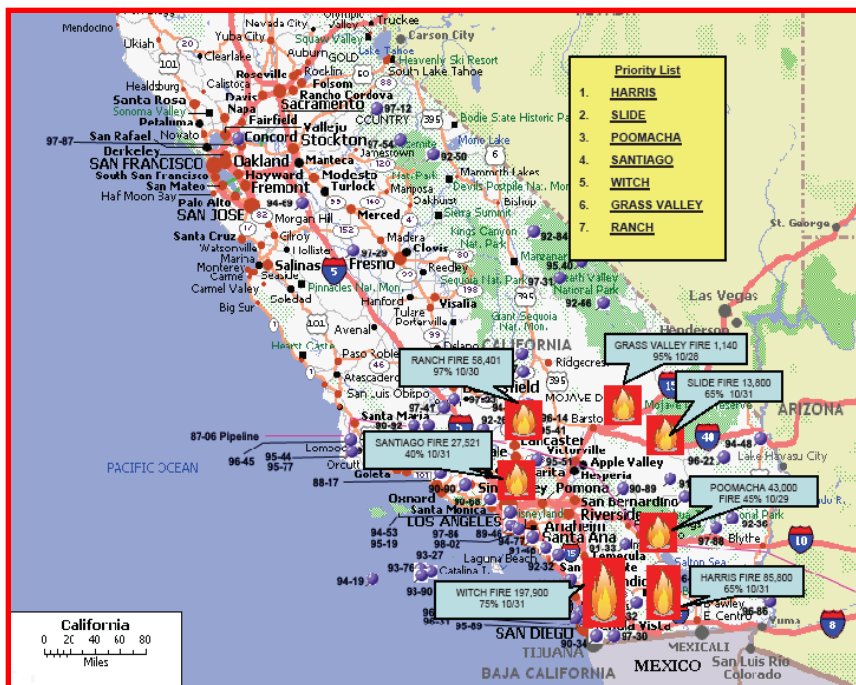


The Working Group is composed of Primary and Alternate representatives from the following HA/TMA offices:

- TRICARE Operations, Lead, Health Plan Operations (HPO)
- TRICARE Operations, Policy Support SME, HPO
- Communication and Customer Service (C&CS), HPO
- TMA Aurora, TRICARE Acquisitions, HPO
- Force Health Protection/Deployment Health
- Office of the Chief Financial Officer (OCFO)
- Office of the Chief Medical Officer (OCMO)
- TRICARE Regional Office South
- TRICARE Regional Office West
- TRICARE Regional Office North
- TRICARE Dental Program
- TRICARE Pharmacy
- TMA Privacy Office
- TMA Office of General Counsel



California Wild Fires



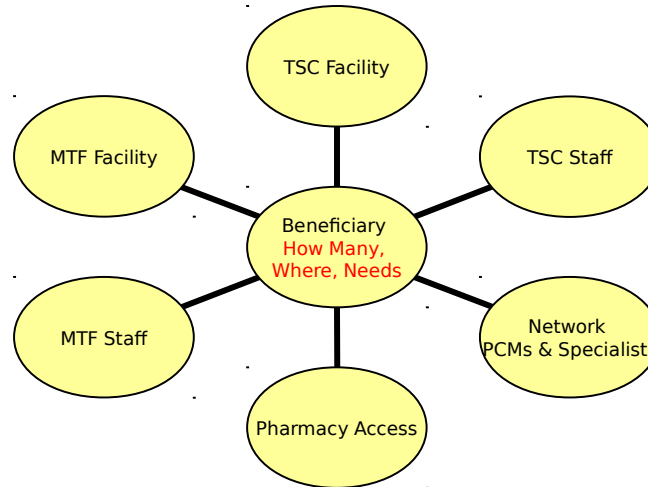
Date	Time	Event/Action
10/22/07		Phone calls in the affected area transferred to unaffected area
10/23/07		Presidential Declaration of State of Emergency for California
10/23/07		ESF#8 Operations Order #01-2007 issued
		Early prescription refills authorized
10/23/07	1301hrs	ESWG Activated
10/23/07		ESWG Teleconference
		ESWG Chair provides POC information to TRO-W leadership
10/23/07		HHS Activates NDMS IRCT, 2 DMAT, 1 CalMAT (Qualcom), 2K medical beds for evac centers
10/24/07		38 Non-DoD patients transferred to NMC San Diego
10/24/07		TRICARE C&CS posts announcement on beneficiary home page with link to Express Scripts, Inc (ESI)
10/24/07		ESWG Teleconference
10/25/07		Decision made regarding emergency exception to the normal CFR requirements
10/25/07		ESWG Teleconference
10/26/07		TRO West requests PCM Referral Waiver
10/26/07		HA Approval of PCM Referral Waiver
10/26/07		ESWG Teleconference
10/29/07		Transition to Recovery Operations
10/29/07		ESWG Teleconference
10/29/07		Recommendation to stand down the ESWG and resume normal support relationships



Responding to an Event



Event Collaboration Timeline



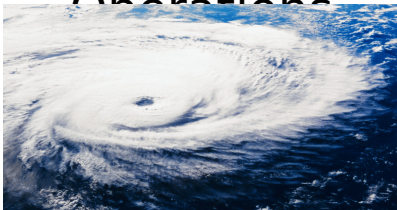
- Special Needs Evacuation
- Media Releases
- BENECAAT Analysis Starts

- PCM Blanket Waiver
- External Resource Sharing
- Internal Resource Sharing
- Clinical Support Agreements
- Media Releases
- TMA Emergency Working Group Support

- Pharmacy
- Coordinate Other MTF Support

Communication of Needs & Assessment

Projected Hazard Event Affects Normal Operations



Actual Hazard Event Affects Normal Operations



Efforts to Return to Normal



Recovery, Normal Operations or New Normalcy

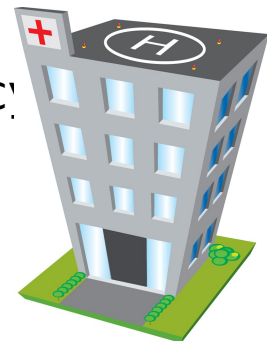


EXHIBIT 5 – REQUEST FOR WAIVER OF PCM REFERRALS

Date of Request _____

Data items to provide to TRO South:

MTF Enrollment Site Name: _____

MTF Parent DMIS ID: _____

MTF Child DMIS ID (if applicable): _____

Date of Service for Waiver of PCM Referrals to begin: _____

Recommended Date of Service for Waiver of PCM Referrals to end: _____

Recommend Waiver of PCM Referrals for local network enrollees: ____ YES

NO

Point of Contact for Questions: _____

Name: _____

Phone: _____

Email: _____

MTF Commander's Signature

Approved/Disapproved:

Michael A. Gill, SES
Director

**MTF CO Fills Out
Waiver Request**

Faxes/Emails to TRO-S
Kelly.coughlin@tros.tma.osd.mil and
jerry.brown@tros.tma.osd.mil
210-292-3222 Fax

**TRO-S drafts Memo,
Reg. Dir. Signs**

**FWDS to TMA
CONTINGENCY OFF**
LCDR Eric Timmens

**Routes for
Signature**

**Approval Copied to
Region and MTF**

**Determine Media
Releases**

Contingency Exercise/Event Tracking Form

Please fill out the form as events/exercises occur. Use the Description of event box to clarify any entry choices (other) as needed. TRO-South will use feedback on this form to record exercises and develop a portfolio of MTF activities in order to better serve MTFs through policy decisions, process changes, or development of regional exercises.

1. MTF Name		2. Date	
3. Service Affiliation			
4.a. MTF POC		4.a. TSC POC	
4.b. MTF POC Phone Number		4.b. TSC POC Phone Number	
4.c. POC Email		4.c. TSC Email	
5. a. Type of Event		5. b. Scenario Risk Level	
5.c. Scenario		5.d. Scenario Other	
6. Description of Event			
7. MCSC Response			
8. MTF Lessons Learned			
Scenario Risk Level			
Minor	Any event that leads to unscheduled partial day closing of TSC/MTF which impedes beneficiaries access to care. TSC and MTF collaboration on the local level.		
Moderate	Any event that leads to one day to a few days closing TSC/MTF. TSC and MTF collaboration includes TRO-S and MCSC consult to determine support needs.		
Major	Any event that leads to evacuation of one or more MTF or limits care over a few days requiring PCM Referral Waiver to be Requested and TMA ESWG convenes to render support.		
Catastrophic	Any event that leads to several weeks of beneficiary access being affected in or more MTFs/Network, PCM Waiver Referral Approved, assesment of Network required of MCSC and Regional Office. TMA ESWG convenes for support for more than 2 weeks.		

TROSOUTH Contingency Officer:
Use scenario definition list at bottom of form to help determine risk level of scenario. If uncertain of which level to use, use highest level that seems to fit the situation.

TROSOUTH Contingency Officer:
Fill this block if Scenario List does not adequately reflect incident.

TROSOUTH Contingency Officer:
Please include synopsis of exercise or actual event to include, short description of incident, number of enrollees, and time length of affect on normal MTF/Network operations.

TROSOUTH Contingency Officer:
Briefly describe type of MTF actions expected/taken in response to drill or event.

TROSOUTH Contingency Officer:
Use this block to identify if exercise goals were met, if any update to policies occurred due to exercise or event, recommendations to other MTFs on lessons learned.



Recent TRO-South Exercise/Event



From: Terry Handley [thandley@humana.com]

Sent: Tue 6/3/2008 9:30 AM

To: bkissinger; ddean; Gay Stewart; Joseph.sanchez@altus.af.mil; kcrowe; kwilliams4; lsteponaitis; Lynda Bowers; Mark Stambaugh; pesselman; Randall Phillips; rgaunce; Tom E Mattingly; Yvonne Easley

Cc: Brown, Jerry, CIV, OASD(HA)/TMA; Coughlin, Kelly, LCDR, OASD(HA)/TMA

Subject: Information Update - Description has changed: Contingency Plan Exercise at the 97th Medical Group, Altus AFB

Attachments:  0097 97th Med Grp Contingency Plan OP4.doc (341 KB);  Altus AFB Contingency 060308.pdf (55 KB)

Description

Toll Free Dial-In Number: 1-866-374-6518 Conference Code: 5023012304#

The TSC and Market Director for Altus have received a Contingency Plan notification with the following scenario (attached). "Exercise, Exercise, Exercise, The 97" MDG building was hit by a tornado on 3 June 2008 @ 0330 and was completely demolished there are no longer medical or pharmaceutical capability/resources on base. You must send all patients out to other care facilities."

This meeting is called in accordance with the Contingency Plan for Option Year 4 (Attached. Option Year 5 not yet received from the MTF).

(See attached file: 0097 97th Med Grp Contingency Plan OP4.doc) (See attached file: Altus AFB Contingency 060308.pdf)

The information transmitted is intended only for the person or entity to which it is addressed and may contain CONFIDENTIAL material. If you receive this material/information in error, please contact the sender and delete or destroy the material/information.

EXHIBIT 4 – CRITICAL PROVIDER SPECIALTY LISTING

Critical Provider Specialty Listing for Altus AFB 97th Medical Group

Specialty	Available MTF FTEs	FTEs Subject to Deployment	Comments
Primary Care	8	7	1 Contract Provider
Surgical Specialties			
ENT			
General Surgery			
OB/Gyn			
Ophthalmology			
Orthopedic Surgery			
Urology			
Other Surgical Specialties			
Hospital Based Physicians			
Anesthesiology			
Pathology			
Radiology			
Medical Specialties			
Allergy/Immunology			
Cardiology			
Dermatology			
Gastroenterology			
Hematology/Oncology			
Nephrology			
Neurology			
Physical Medicine			
Pulmonary Disease			
Other Medical Specialty			
Psychiatry			
Behavioral Health	3	2	
Total – All Specialties	11	9	1 Contract Provider

NOTE: This tool is to be used in conjunction with the ZUPRV400 Network adequacy report available on the HMHS TRICARE Data Mart for contingency planning and network development.



Air Force Print News Today

Air Force news from around the world



Severe winds damage Altus Air Force Base

by Michael Fletcher
97th Air Mobility Wing Public Affairs Office

6/9/2008 - **ALTUS AIR FORCE BASE, Okla.** -- Altus Air Force Base and the City of Altus were struck at about 7 p.m. , June 5, by sustained winds of 40 mph and gusts clocked at 87 mph by the National Weather Service. Unconfirmed reports of funnel clouds were reported to local emergency operations centers.

The wind knocked out the electrical grid supplying the community and Altus AFB and severely damaged many businesses and homes in the area. Despite the damage there were only two minor injuries reported.

On Altus AFB, numerous trees were damaged or destroyed, the commercial electrical service interrupted, some buildings received roof damage and the flightline was covered with foreign object debris. No aircraft were damaged. Many migratory bird nests with newly hatched chicks were destroyed. Essential base operations and refrigeration systems went on generator power.



Altus Air Force Base Airmen volunteer to help an Altus, Okla. resident in the aftermath of a storm that struck June 5. Winds gusting to 87 mph felled trees, damaged electrical grids and damaged more than 100 residences. The Airmen assisted in clean up on Altus AFB and then were released to help area residents clear debris. (U.S. Air Force/A1C Cherise Bryant)

The next morning, hundreds of Airmen formed a line and conducted a flightline FOD walk, filling trucks with limbs and other debris to clear the runways and restore flying operations. Civil engineering started damage assessment and Airmen used chain saws and trucks to remove fallen trees and branches. Additional generators arrived from Vance AFB, Okla., Tinker AFB, Okla., and Sheppard AFB, Texas.

"I'm extremely proud of the way the Airmen in this wing came together in recovering from the storm's damage," said Col. David W. Alvin, 97th Air Mobility Wing commander. "We really had more volunteers than we could use, and within a few short hours we were conducting our flying mission again despite the fact that we were without our main power. We had Airmen lining up to assist our friends in the city of Altus with their cleanup as well. They are truly America's finest."

Volunteer airmen reported to the City of Altus EOC and were sent out in teams to help bring debris to street curbs for removal.

I'm very happy with the relationship between the city [of Altus] and Altus AFB," said Lloyd Colston, City of Altus emergency management director. "Shortly after the wind hit, representatives from the base emergency operations center came to our city EOC to coordinate disaster response. The next morning, volunteer Airmen came to the forefront to help the community and assisted residents in removing debris."

Commercial power was restored after 72 hours of outage at 7 p.m., June 8.

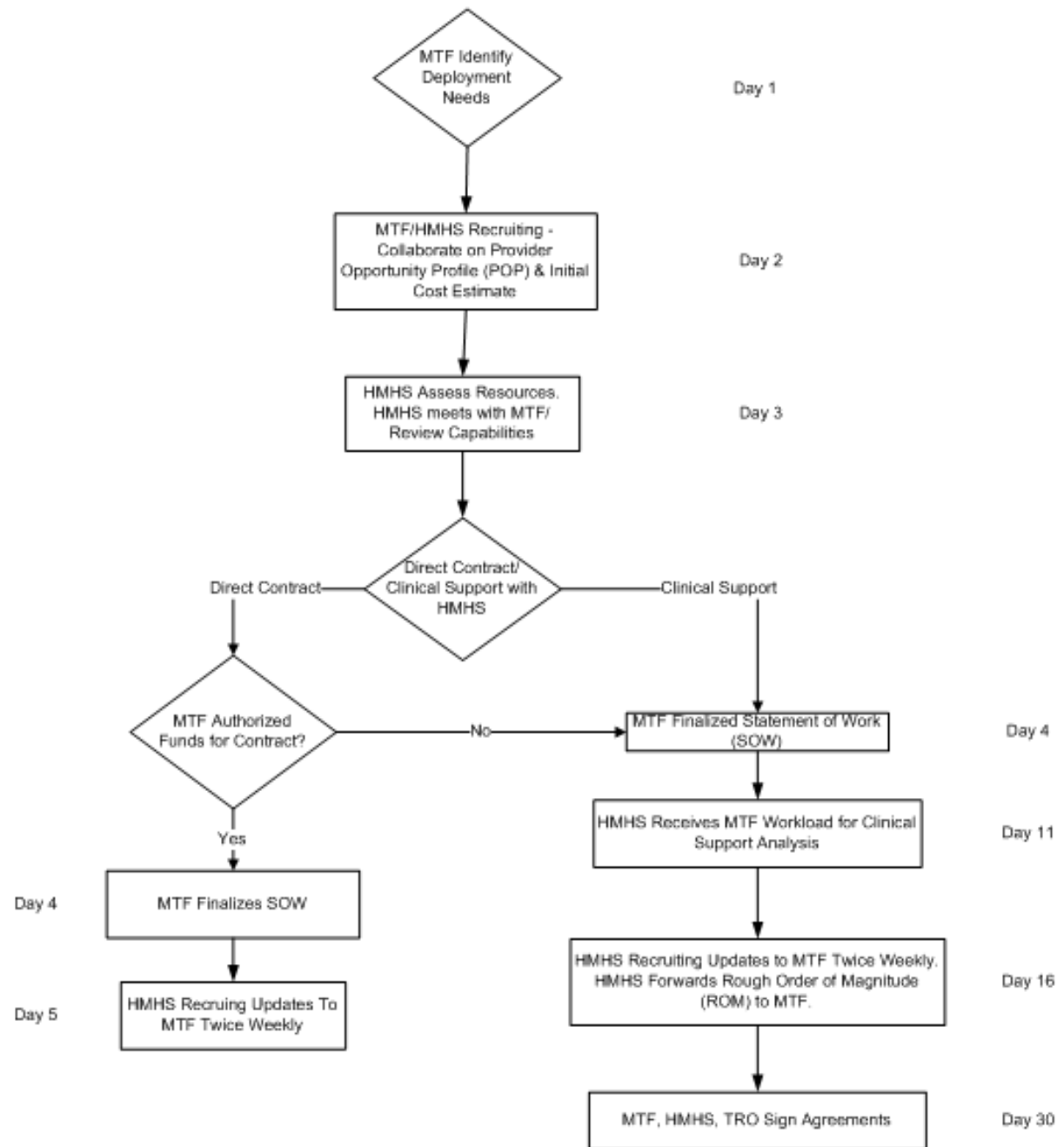
Damage estimate to Altus AFB is \$5.5 million.



Contingency Operations



OPY 5 Exhibit 3 - Clinical Support Decision Tree





Recommendations



- Update and review plan periodically
- Actual event occurs, use tracking form to account for it.
 - “what if worse case scenario” Update and review plan periodically
- Exercise Contingency Plan Twice a Year with MCSC
 - Set An Objective to Evaluate MCSC Support in Drill Scenario
 - Carry Out Drill and add evaluation MCSC after the fact.
 - Conduct tabletop of a drill or several drill scenarios.



Questions & Answers